## CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, with sufficient postage, in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on the below date:

Date: May 12, 2004

BRINKS HOFER GILSON &LIONE

Appln. of: Ransom, et al.

pln. No.:

10/666,398

Filed:

September 19, 2003

For:

**PUSH COMMUNICATIONS** 

ARCHITECTURE FOR INTELLIGENT

**ELECTRONIC DEVICES** 

Attorney Docket No:

6270/126

Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

**TRANSMITTAL** 

**Examiner: Not Yet Assigned** 

Art Unit:

Sir:

Attac	hed	is/a	are:
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 $\boxtimes$ Change of Correspondence Address

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## Fee calculation:

No additional fee is required. Ø

Small Entity.

An extension fee in an amount of \$\_\_\_\_\_ for a \_\_\_\_\_-month extension of time under 37 C.F.R. § 1.136(a).

A petition or processing fee in an amount of \$\_\_\_\_ under 37 C.F.R. § 1.17(\_\_\_\_).

An additional filing fee has been calculated as shown below: П

					Sma	Small Entity		Not a Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	or	Rate	Add'l Fee
Total		Minus			x \$9=			x \$18=	
Indep.		Minus			x 43=			x \$86=	
First Pre	esentation of Multiple D	ep. Claim	1		+\$145=		<u> </u>	+ \$290=	
					Total	S		Total	S

ree payment	:
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	A check in the amount of \$ to cover the above-identified fee(s) is enclosed.
	Please charge Deposit Account No. 23-1925 in the amount of \$ . A copy of this Transmittal is enclosed for this purpose.
	Payment by credit card in the amount of \$ (Form PTO-2038 is attached).
$\boxtimes$	The Director is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.

The Director is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and any patent application processing fees under 37 CFR § 1.17 associated with this paper (including any extension fee required to ensure that this paper is timely filed), or to credit any overpayment, to Deposit Account No. 23-1925.

ames L. Katz (Reg. No. 42,711)

Respectfully submitted.

PTO/SB/122 (10-01)

Approved for use through 10/31/2002. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 10/666,398 Application Number CHANGE OF September 19, 2003 Filing Date SPØNDENCE ADDRESS First Named Inventor Ransom Application Art Unit Address to: Not Yet Assigned **Examiner Name** Commissioner for Patents P.O. Box 1450 6270/126 Alexandria, VA 22313-1450 **Attorney Docket Number** Please change the Correspondence Address for the above identified application to: Place Customer Customer Number 00757 - Brinks Hofer Gilson Lione Number Bar Code Type Customer Number Here Label here OR Firm or Individual Name **Address Address State** Zip City Country **Telephone** Fax This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "request for Customer Number Data Change" (PTO/SB/124). I am the Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or Agent of record. Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number Typed or Printed Name James L. Katz Signature Date 5/12 04 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.\* \*Total of forms are submitted.